

### DEPARTMENT OF INSURANCE STATE OF ARIZONA

Financial Affairs Division - Compliance Section 2910 North 44<sup>th</sup> Street, Suite 210 Phoenix, Arizona 85018-7269 Phone: (602) 364-3998 Fax: (602) 364-3989

# AUDITED FINANCIAL REPORT INSTRUCTIONS AND GUIDELINES FOR STANDARDIZED ORGANIZATIONAL HARDSHIP EXEMPTION AND SAMPLE AFFIDAVIT

#### **General Instructions**

An insurer required to file audited financial reports may apply to the Director for an exemption from this requirement if compliance with this requirement would constitute a financial or organizational hardship upon the insurer.

Guidelines for a Standardized Organizational Hardship Exemption are shown on Page 2.

These Guidelines, and any exemptions granted pursuant to them, apply only to reports and filings for the calendar year shown above.

An insurer that meets the criteria set forth in the guidelines may apply for an exemption by completing the requirements below.

**DO NOT** use this affidavit if you qualify for the automation exemption. See Form E-AFR.GFE for instructions.

#### Filing Requirements for Exemption

An application for an Organizational Hardship Exemption from filing audited financial reports which is made pursuant to the Standardized Organizational Hardship Exemption guidelines set forth herein by this Department shall be comprised of:

- 1. A letter, signed by an officer of the company who is authorized to sign the Annual Statement, <u>requesting</u> an Organizational Hardship Exemption; and
- 2. A properly completed and executed affidavit. The affidavit shall be in a form prescribed by the Department (see sample pages 3 and 4) and shall be signed by an officer of the company who is authorized to sign the Annual Statement.

#### **DUE DATE**

The application must be filed <u>prior to</u> filing the Annual Statement and not later than March 31st. DELINQUENT APPLICATIONS WILL NOT BE CONSIDERED.

All applications for Organizational Hardship Exemptions should be directed to:

Rose McNabb, Compliance Section Supervisor Financial Affairs Division Arizona Department of Insurance 2910 North 44th Street, Suite 210 Phoenix, Arizona 85018-7269

#### **Documentation Requirements**

The insurer shall maintain documentation to support the statements made in the affidavit and shall produce such documentation upon request.

#### Approval Process

A complete and proper application shall be deemed approved upon receipt by the Department, unless the Department notifies the company to the contrary. An insurer desiring acknowledgment of receipt by the Department may enclose a duplicate of the affidavit along with a self-addressed postage prepaid envelope.

The Department may withdraw or rescind approval of an exemption if the insurer does not meet all requirements.

#### Other Organizational or Financial Hardships

An insurer that does not meet the criteria set forth in these guidelines may still apply for an exemption by submitting to the Department a letter requesting an organizational or financial hardship exemption and an affidavit signed by an officer of the company avowing to the facts which create the hardship.

Applications from insurers that do not claim to meet the criteria set forth in the guidelines shall be subject to review and approval by the Department. The Department shall advise the insurer as to whether the application is granted or denied.

## GUIDELINES FOR STANDARDIZED ORGANIZATIONAL HARDSHIP EXEMPTION

The following are the cumulative criteria for granting organizational hardship exemptions from filing requirements for audited financial statements for Arizona domestic reinsurers<sup>1</sup>.

- 1. The insurer is a reinsurer holding a certificate of authority in the State of Arizona only; and
- 2. The reinsurer complies with the provisions of items 3 through 6 with respect to <u>each</u> reinsurance contract and ceding insurer; and
- 3. A trust account or custodial account is established with a qualified financial institution located in the United States which is organized under the laws of the United States or any State of the United States that has been granted authority to operate with fiduciary powers, in which assets equal to the net reserve credit taken by the ceding insurer for the business ceded are deposited or, in the alternative, the reinsurance agreement provides that funds will be withheld by the ceding insurer; and
- 4. The trust account or custodial account requires only the ceding insurer's (direct writer's) signature in order to withdraw funds and/or to pay claims, provided however, that with the approval of the ceding insurer, funds may be withdrawn by the assuming reinsurer providing that, after the withdrawal, the market value of assets in the trust account or custodial account shall be no less than 102 percent of the net reserves for the business ceded; and
- 5. The reinsurer has obtained from the bank, as custodian or trustee, a verification and listing of assets held in a trust or custodial account for the purposes described in A.R.S. § 20-1092 as of the calendar year end for which the exemption is requested, and
- 6. The reinsurer has not assumed gross premiums of more than five million dollars in the calendar year for which the exemption is requested and is not otherwise required to file an audited financial report on the basis of direct premiums.
- For purposes of these Guidelines, a "reinsurer" shall mean an insurer having direct premiums written of less than \$1,000,000 and assumed premiums pursuant to contracts and/or treaties of reinsurance of \$1,000,000 or more.

#### ARIZONA DEPARTMENT OF INSURANCE

# STANDARDIZED ORGANIZATIONAL HARDSHIP EXEMPTION SAMPLE

#### **AFFIDAVIT**

State of		)		
		) ss.		
County of		)		
I, _		, being first duly sworn, upon m	y oath depose and say:	
1.	I am the	of	, whose NAIC number is	and am duly
authorized	to execute	this affidavit on its behalf; and		
2.		is a reinsurer holding a	certificate of authority in the State of Arizona o	nly; and
3.		complies with the provis	sions of items 4 through 7 of this affidavit wit	th respect to each
reinsuranc	e contract a	and ceding insurer; and		
4.	A trust a	ccount or custodial account is	established with a qualified financial institut	ion located in the
United Sta	tes which i	s organized under the laws of the	he United States or any State of the United Sta	ates that has been
granted au	thority to o	perate with Fiduciary power, in	which assets equal to the net reserve credit to	aken by the ceding
insurer for	the busine	ss ceded are deposited or, in th	ne alternative, the reinsurance agreement prov	ides that funds will
be withheld	d by the ce	ding insurer; and		
5.	The trust	account or custodial account	requires only the ceding insurer's (direct wr	iter's) signature in
order to wi	ithdraw fun	nds and/or to pay claims, provid	ded however, that with the approval of the ced	ding insurer, funds
may be wi	thdrawn by	the assuming reinsurer provid	ding that, after the withdrawal, the market valu	ue of assets in the
trust accou	ınt or custo	odial account shall be no less tha	an 102 percent of the net reserves for the busir	ness ceded; and

6	has obtained from the bank, a	as custodian or trustee, a verification and listing of ass	ets held
in a trust or custodial	account for the purposes describ	ped in A.R.S. § 20-1092 as of the most recent calend	lar year
end; and			
7	has not assumed gross pren	miums of more than five million dollars in the	calendar
year and is not otherwi	se required to file an audited finar	ncial report on the basis of direct premiums.	
Further affiant	sayeth not.		
		(name)	
Subscribed and sworn	to before me this day of	, 20	
_			
Stamp or seal			_
		Notary Public	
My commission expires	3:		
(date)			